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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/924,952	08/09/2001	Charlton Clinton Tooke III	13355	2009

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EXAMINER

PASS, NATALIE

ART UNIT	PAPER NUMBER
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3626

NOTIFICATION DATE	DELIVERY MODE
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06/02/2008

ELECTRONIC

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Notice of the Office communication was sent electronically on above-indicated "Notification Date" to the following e-mail address(es):

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Office Action Summary	Application No.	Applicant(s)	
	09/924,952	TOOKE, CHARLTON CLINTON	
	Examiner	Art Unit	
	Natalie A. Pass	3626	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

- 1) ☒ Responsive to communication(s) filed on 29 February 2008 and 30 January 2008.
- 2a) ☐ This action is **FINAL**. 2b) ☒ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

- 4) ☒ Claim(s) 54-94 is/are pending in the application.
- 4a) Of the above claim(s) _____ is/are withdrawn from consideration.
- 5) ☐ Claim(s) _____ is/are allowed.
- 6) ☒ Claim(s) 54-94 is/are rejected.
- 7) ☐ Claim(s) _____ is/are objected to.
- 8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some * c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
 2. ☐ Certified copies of the priority documents have been received in Application No. _____.
 3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

* See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

- | | |
|--|---|
| 1) <input checked="" type="checkbox"/> Notice of References Cited (PTO-892) | 4) <input type="checkbox"/> Interview Summary (PTO-413) |
| 2) <input type="checkbox"/> Notice of Draftsperson's Patent Drawing Review (PTO-948) | Paper No(s)/Mail Date. _____ |
| 3) <input checked="" type="checkbox"/> Information Disclosure Statement(s) (PTO/SB/08) | 5) <input type="checkbox"/> Notice of Informal Patent Application |
| Paper No(s)/Mail Date <u>2/12/08</u> . | 6) <input type="checkbox"/> Other: _____ |

DETAILED ACTION

Notice to Applicant

1. A request for continued examination under 37 CFR 1.114, including the fee set forth in 37 CFR 1.17(e), was filed in this application after final rejection. Since this application is eligible for continued examination under 37 CFR 1.114, and the fee set forth in 37 CFR 1.17(e) has been timely paid, the finality of the previous Office action has been withdrawn pursuant to 37 CFR 1.114. Applicant's submissions filed on 29 February 2008 and 30 January 2008 have been entered.

2. This communication is in response to the Request for Continued Examination filed 29 February 2008 and amendment filed on 30 January 2008. Claims 1-53 have been cancelled. Claims 54-94 have been newly added. Claims 54-94 remain pending. The Information Disclosure Statement(s) filed 12 February 2008 have been entered and considered.

Claim Rejections - 35 USC § 112

3. The following is a quotation of the second paragraph of 35 U.S.C. 112:

The specification shall conclude with one or more claims particularly pointing out and distinctly claiming the subject matter which the applicant regards as his invention.

4. Claims 79, 83, 85 are rejected under 35 U.S.C. 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which applicant regards as the invention.

(A) Claim 79 recites the limitation "the health savings account" in lines 3 and 5.

Although independent claim 54 recites "a health savings account," this limitation is recited in the

Art Unit: 3626

alternative only. Accordingly, there is insufficient antecedent basis for this limitation in the claim.

(B) Claim 83 recites the limitation "the health saving account" in line 2. Although independent claim 54 recites "a health savings account," this limitation is recited in the alternative only. Accordingly, there is insufficient antecedent basis for this limitation in the claim.

(C) Claim 85 recites the limitation "the web page" in line 1. There is insufficient antecedent basis for this limitation in the claim.

5. The rejections of claims 1-6, 8-11, 43, 45-53 under 35 U.S.C. 112, first paragraph are hereby withdrawn due to the amendment filed 30 January 2008.

Claim Rejections - 35 USC § 102

6. The following is a quotation of the appropriate paragraphs of 35 U.S.C. 102 that form the basis for the rejections under this section made in this Office action:

A person shall be entitled to a patent unless –

(e) the invention was described in (1) an application for patent, published under section 122(b), by another filed in the United States before the invention by the applicant for patent or (2) a patent granted on an application for patent by another filed in the United States before the invention by the applicant for patent, except that an international application filed under the treaty defined in section 351(a) shall have the effects for purposes of this subsection of an application filed in the United States only if the international application designated the United States and was published under Article 21(2) of such treaty in the English language.

7. Claims 54-71, 74-80, 85-86, 88-92 are rejected under 35 U.S.C. §102(e) as being anticipated by Joao, U.S. Patent Application Publication Number 2001/0032099.

Art Unit: 3626

(A) As per newly added claim 54, Joao teaches a centralized online health care management system, comprising:

a health intermediary system configured to coordinate reimbursement between a health care provider and a health care consumer for a health care expenditure for health care that has been or will be provided to the health care consumer (Joao; paragraphs [0029], [0047], [0136], [0138], [0302]-[0303]),

wherein the health intermediary system is further configured to process transaction parameters related to the health care expenditure (Joao; paragraphs [0029], [0035], [0047], [0138], [0233], [0302]-[0303]),

the processing of the transaction parameters includes the health intermediary system further configured to receive from the health care provider claim related information for the reimbursement of the health care expenditure (Joao; paragraph [0231], [0302]-[0303]) and the health intermediary system further configured to receive from the health care consumer claim related information and verification information for the reimbursement of the health care expenditure (Joao; paragraph [0231], [0302]-[0303]), and

the health intermediary system further includes:

a processing host device coupled over a communications network to a payment host system and configured to allocate financial resources of an online health account of the health care consumer and an account of the health care provider for electronically “transfer[ing] funds (and/or deduct[ing] funds) from the payer's account and deposit[ing] the funds (and/or add[ing] the funds) to the providers account” (reads on “reimbursing the health care provider for the health care expenditure” (Joao; paragraphs [0301]-[0303]),

wherein the allocating of the financial resources for the health care includes the processing host device configured to request, gather and receive the transaction parameters for the health care expenditure from the health care consumer and the health care provider, and transaction parameters from the payment host system (Joao; paragraphs [0014]-[0021], [0029], [0037], [0047], [0138], [0233], [0255], [0302]-[0303]), and

the online health account includes plural accounts of the health care consumer, the plural accounts selected from a bank account, a credit card account, a debit card account, a credit line, an insurance account, a health account provided by an employer, and a health savings account (Joao; paragraphs [0301]-[0302]).

(B) As per newly added claims 55-57, Joao teaches a system as analyzed and discussed in claim 54 above

wherein the health intermediary system further comprises:

a communications interface with the communications network and configured to enable the health care intermediary system to communicate with the health care consumer, the health care provider, and the payment host system (Joao; paragraphs [0014]-[0021]);

wherein the communications interface is further

configured to generate a web page accessible to the health care provider for receiving from the health care provider the claim related information for the reimbursement for the health care expenditure, and to generate a web page accessible to the health care consumer for receiving from the health care consumer the claim related information and the verification information for the health care expenditure (Joao; paragraphs [0014]-[0021], [0140]-[0142]); and

further comprising:

a payment host system coupled to the processing host device over the communications network and configured to transfer between the financial resources of the online health account of the health care consumer and the account of the health care provider for the electronic reimbursement of the health care provider for the health care expenditure (Joao; paragraphs [0301]-[0303]).

(C) As per newly added claims 58-62, Joao teaches a system as analyzed and discussed in claim 54 above

wherein the health intermediary system further comprises:

a services host device configured to offer a services database to the health care consumer, enable the health care consumer to search through a directory of information, including a directory of health care providers, and generate results based on search parameters (Joao; paragraphs [0038], [0250]);

wherein the services host device is further configured to enable the health care consumer to search for a health care provider by location, by costs, by affiliation and/or by specialty (Joao; paragraphs [0038], [0250]-[0252]);

wherein the services host device is further configured to provide health monitoring programs and assessments that enable the health care consumer to proactively manage health care (Joao; paragraphs [0025], [0068], [0173]-[0175], [0194]-[0195], [0214]);

wherein the services host device is further configured to provide the health monitoring programs and the assessments by tracking lifestyle and regimens of the health care consumer (Joao; paragraphs [0041], [0148], [0269]); and

wherein the services host device is further configured to provide the health monitoring programs and the assessments by prompting the health care consumer for information related to age, profession, and/or gender (Joao; paragraphs [0041], [0148], [0241], [0269]), and based on the prompted information proactively manage the health care of the health care consumer, including reminding the health care consumer to participate in checkups (Joao; paragraph [0269]), and tracking lifestyle information of the health care consumer (Joao; paragraph [0148]) with a goal of minimizing medical problems by detecting a condition or risk factor of the health care consumer at an early stage (Joao; paragraphs [0031], [0152]-[0153], [0224]).

(D) As per newly added claims 63-66, Joao teaches a system as analyzed and discussed in claim 54 above

wherein the health intermediary system further comprises: a storage host device configured to maintain data regarding the health care consumer, including information about an identity (Joao; paragraph [0148]) and account information of the health care consumer (Joao; paragraphs [0241], [0301]-[0303]);

wherein the storage host device is further configured to maintain data regarding the health care consumer, including information related to a plurality of health care plans, including “preparing policy quotes for comparison” (reads on “repricing options”) (Joao; paragraphs [0128], [0272]-[0274]);

wherein the storage host device is further configured to maintain data regarding the health care consumer, including information related to a plurality of health care program factors, including additional insurance, and indicators that can be used to adjust a cost of health care for the health care consumer (Joao; paragraphs [0038], [0326]); and

wherein the storage host device is further configured to maintain data regarding the health care consumer, including information about relationships with one or more health care providers (Joao; paragraphs [0038]-[0040], [0323]).

(E) As per newly added claims 67-71, Joao teaches a system as analyzed and discussed in claim 54 above

wherein the health intermediary system further comprises:

a security host device configured to verify identification and transaction information that is transmitted and received by the health intermediary system (Joao; paragraphs [0050], [0084], [0143], [0231], [0312]-[0313], [0320]);

wherein the security host device is further configured to verify an identity of users and systems communicating with the health care intermediary system (Joao; paragraphs [0050], [0084], [0143], [0231], [0312]-[0313], [0320]);

wherein the security host device is further configured to verify the transaction parameters transmitted and received by the health care intermediary system (Joao; paragraphs [0143], [0236]);

Art Unit: 3626

wherein the services host device is further configured to generate content, including health management tools, health workbooks, health news, and a health library (Joao; paragraphs [0156]-[0159]); and

wherein the services host device is further configured to generate content, including access to a news article related to a medical condition (Joao; paragraphs [0156]-[0159], [0164]).

(F) As per newly added claims 74-76, Joao teaches a system as analyzed and discussed in claim 54 and 58 above

wherein the services host device is further configured to integrate information provided by the health care consumer with other information, including allowing the health care consumer access a health care provider database of the services host device to select the health care provider (Joao; paragraphs [0037]-[0038], [0211], [0250]);

wherein, after the health care consumer is treated by the health care provider and the health care provider is reimbursed from the online health account, the services host device is further configured to integrate information about “reimbursement rates” (reads on “a cost of reimbursement,” such that subsequent access to the services host device by the health care consumer includes providing to the health care consumer information about “reimbursement rates” (reads on “the cost of the reimbursement” (Joao; paragraphs [0147], [0152]-[0153], [0166]); and

wherein the services host device is further configured to associate the selected health care provider with a profile of the health care consumer, such that subsequent searches display previously selected health care providers (Joao; paragraphs [0147], [0166], [0248]).

(G) As per newly added claims 77-79, Joao teaches a system as analyzed and discussed in claims 54 and 58 above

wherein the services host device is further configured to identify a health care provider that meets criteria specified by the health care consumer, including enabling the health care consumer to identify one or more health care providers when “far from home” (reads on “in a specified geographic radius” (Joao; paragraphs [0038], [0088], [0247], [0250]-[0252]));

wherein the services host device is further configured to identify a health care provider that meets criteria specified by the health care consumer, including enabling the health care consumer to identify one or more health care providers based on “fees” (reads on “cost criteria”) (Joao; paragraphs [0038], [0088], [0247], [0250]-[0252]); and

further comprising: a magnetic card configured for the health care consumer and including information regarding the health savings account, enabling the health care consumer to reimburse the health care provider for health care provided (Joao; paragraph [0313]), wherein health care provider “transfers funds ... [...] ... to the provider’s account” (reads on “debits the health savings account for the health care provided using the magnetic card”) (Joao; paragraphs [0301]-[0303], [0313]).

(H) As per newly added claims 80, 85-86, 88-89, Joao teaches a system as analyzed above

wherein the services host device is further configured to integrate content from disparate sources, including combining data from the health care provider with data from a partner, and

Art Unit: 3626

combining information from multiple partners to create a composite of information from “various external sources” (reads on “multiple sources”) (Joao; paragraphs [0164]-[0165]), and which is displayed to the health care consumer enabling a view of information not previously linked or accessible on a generated “report” (reads on “same display”) (Joao; paragraphs [0069], [0156], [0164]-[0165], [0169]-[0170]);

wherein the web page accessible to the health care consumer is configured to allow the health care consumer to allocate funds for electronically reimbursing the health care provider for the health care expenditure for a health care transaction, and the health care transaction includes selecting health care, receiving health care, and reimbursing for provided health care (Joao; paragraphs [0014]-[0022], [0140]-[0142], [0301]-[0303]);

wherein the electronic reimbursement of the health care provider for the health care expenditure is initiated by the health care consumer, including providing a credit or debit card that debits the online health account, or the electronic reimbursement of the health care provider for the health care expenditure is initiated by the health care provider, including the health care provider using a computing device to initiate the reimbursement (Joao; paragraphs [0301]-[0303], [0313]);

wherein the health care consumer provides a smart card that includes an ability to provide or direct resources for the reimbursement (Joao; paragraphs [0301]-[0303], [0313]); and

wherein the health care provider accesses a web site administered by the health care intermediary system to initiate the reimbursement (Joao; paragraphs [0301]-[0303], [0313]).

Art Unit: 3626

(I) As per newly added claims 90-92, Joao teaches a system as analyzed in claims 54, 55, and 86 above

wherein with the reimbursement initiated, the health care intermediary system receives a reimbursement request (Joao; paragraphs [0166], [0255], [0259], [0291], [0301]-[0303]);

wherein completing of the reimbursement includes the health care consumer acknowledging or authorizing the health care expenditure via a web form generated by the health care intermediary system (Joao; paragraphs [0014]-[0021], [0140]-[0142]); and

wherein the health care intermediary system is further configured to display an adjusted online health account reflecting the completed reimbursement (Joao; paragraphs [0069], [0156], [0164]-[0165], [0169]-[0170], [0301]-[0303]).

Claim Rejections - 35 USC § 103

8. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

9. Claims 72-73 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao, U.S. Patent Application Publication Number 2001/0032099, as applied to claim 54 above, and further in view of Henley, U.S. Patent Application Publication Number 2002/0065758.

(A) As per newly added claims 72-73, Joao teaches a system as analyzed and discussed in claim 54 above.

Joao fails to explicitly disclose
wherein the health care intermediary system is further configured to solicit feedback regarding the health care provider from the health care consumer; and
wherein the health care intermediary system is further configured to solicit the feedback, including questioning the health care consumer as to timeliness of service and quality of health care provided by the health care provider.

However, the above features are well-known in the art, as evidenced by Henley.

In particular, Henley teaches
wherein the health care intermediary system is further configured to solicit feedback regarding the health care provider from the health care consumer (Henley; Abstract, paragraph [0037]); and

wherein the health care intermediary system is further configured to solicit the feedback, including questioning the health care consumer as to timeliness of service and quality of health care provided by the health care provider (Henley; Abstract, paragraphs [0019], [0037], [0084]).

It would have been obvious to one of ordinary skill in the art at the time the invention was made to modify the account of Joao to include the above limitations, as taught by Henley, with the motivations of improving the quality of medical services provided to patients and other buyers of medical services (Henley; paragraph [0037]).

10. Newly added claims 81, 82 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao, U.S. Patent Application Publication Number 2001/0032099, as applied to claims 54 and 58 above.

(A) As per newly added claim 81, Joao teaches a system as analyzed and discussed in claims 54 and 58 above wherein the services host device is further configured to generate a detailed display of health care provider information (Joao; paragraphs [0147], [0166], [0248]), including data and links with location information, contact information, cost data (Joao; paragraphs [0150]-[0156], [0164]-[0165], [0169]-[0170], [0251]-[0252]).

Joao fails to explicitly disclose wherein the services host device is further configured to display health care provider information that includes Health Care Financing Administration data, tax data, and licensing information, including sanctions.

However, Joao teaches “the central processing computer 10 will process the request and identify one or more specialists along with their backgrounds, insurance coverage accepted, fees, and/or any educational, professional experience and/or any other information about the provider” (emphasis added) (Joao; paragraph [0252]); Examiner interprets these teachings to teach a form of the services host device being further configured to display the recited limitations.

It would have been obvious to one of ordinary skill in the art at the time the invention was made to modify the account of Joao to include the above limitations, with the motivations of “provid[ing] an apparatus and a method for providing a comprehensive processing system which incorporates data and/or information from any combination and/or all of the participants in the healthcare field, including patients, providers, payers or insurance companies, and/or brokers, agents and/or other intermediaries who act on behalf of any of the above-identified persons or entities” (Joao; paragraph [0014]) and for assisting a patient “to locate a provider and/or a payer

Art Unit: 3626

of healthcare and/or healthcare-related services, goods, or products” (Joao; paragraphs [0251]-[0252]).

(B) As per newly added claim 82, Joao teaches a system as analyzed and discussed in claims 54 and 58 above wherein the services host device is further configured to

combine information regarding the online health account with the services database, including automatically populating portions of the services database with content specific to the health care consumer (Joao; paragraphs [0091]-[0092], [0298], [0318]); Examiner interprets Joao’s teachings of “the present invention can provide for the automatic and/or for the programmed submission of healthcare claims, claim forms, claim requests, benefit requests, etc.,” (Joao; paragraph [0298]) together with “[t]he apparatus of the present invention, in any and/or all of the embodiments described herein, can also be programmed to be self-activating and/or activated automatically” (Joao; paragraph [0318]) to teach a form of the services host device is further configured to combine information regarding the online health account with the services database including automatically populating portions of the services database with content specific to the health care consumer.

It would have been obvious to one of ordinary skill in the art at the time the invention was made to modify the account of Joao to include the above limitations, with the motivations of “provid[ing] an apparatus and a method for providing a comprehensive processing system which incorporates data and/or information from any combination and/or all of the participants in the healthcare field, including patients, providers, payers or insurance companies, and/or brokers, agents and/or other intermediaries who act on behalf of any of the above-identified persons or

entities” (Joao; paragraph [0014]) and for assisting the process by “provid[ing] for the automatic and/or for the programmed submission of healthcare claims, claim forms, claim requests, benefit requests, etc., upon the conclusion of a provider's service, consultation, treatment, procedure, and/or any other event which triggers coverage under a healthcare insurance policy and/or a payer's liability to pay for services and/or treatments” (Joao; paragraph [0298]).

11. Claims 83-84, 93-94 are rejected under 35 U.S.C. 103(a) as being unpatentable over Joao, U.S. Patent Application Publication Number 2001/0032099, as applied to claim 54 above, and further in view of Kenna, et al., U.S. Patent Number 6,108,641.

(A) As per newly added claims 83-84, Joao teaches a system as analyzed and discussed in claim 54 above.

Joao fails to explicitly disclose a system wherein the processing host device is further configured to establish the health saving account of the online health account with a taxable portion and a nontaxable portion to send and receive financial resources therefrom; and

wherein the online health account is further configured to process health care transactions, and the health care intermediary system sets preferences for the taxable portion and the nontaxable portion of the health saving account based on input from the health care consumer.

However, the above features are well-known in the art, as evidenced by Kenna.

In particular, Kenna teaches a system

wherein the processing host device is further configured to establish the health saving account of the online health account with a taxable portion and a nontaxable portion to send and receive financial resources therefrom (Kenna; column 9, line 45 to column 9, line 31); and

wherein the online health account is further configured to process health care transactions, and the health care intermediary system sets preferences for the taxable portion and the nontaxable portion of the health saving account based on input from the health care consumer (Kenna; Figure 2, column 5, lines 33-39, column 9, line 45 to column 9, line 31).

It would have been obvious to one of ordinary skill in the art at the time the invention was made to modify the account of Joao to include the above limitations, as taught by Kenna, with the motivations of “restoring financial control of health care transactions to individual patients” (Kenna; column 2, lines 34-35) and of implementing the MSA (medical savings account) concept by enabling “fluid interaction” and “exchange of timely electronic information” (Kenna; column 3, lines 14-26).

(B) As per newly added claims 93-94, Joao and Kenna teaches a system as analyzed and discussed above

wherein the processing host device is further configured to calculate whether a maximum expenditure limit has been exceeded for the online health account, including an annual cap on deductions that can be debited from the health savings account (Kenna; Figure 10, Item 1115, Figure 11, Item 1200, column 4, lines 1-9, column 14, lines 20-52); and

wherein, if the maximum expenditure has been exceeded, the processing host device is further configured to determine whether a third party provides a portion of cost of health care for the health care consumer and if so, all or a portion of the remaining charges are transferred to the third party provider, including the insurance company or the employer of the health care consumer, and if not, no allocating of resources from the third party is performed (Kenna; Figure 10, Item 1145, column 4, lines 1-9, column 14, lines 20-52).

The motivations for combining the respective teachings of Joao and Kenna are as given in the rejection of claim 83 above, and incorporated herein.

12. Claim 87 is rejected under 35 U.S.C. 103(a) as being unpatentable over Joao, U.S. Patent Application Publication Number 2001/0032099, as applied to claim 54, 55, 86 above, and further in view of Chan, et al., U.S. Patent Number 6005942.

(A) As per newly added claims 87, Joao teaches a system as analyzed and discussed in claims 54, 55, and 86 and above

wherein the health care consumer provides a smart card of the health care intermediary system to a card reader (Joao; paragraph (Joao; paragraphs [0209], [0301]-[0303], [0312]-[0314]).

Joao fails to explicitly disclose a proprietary card.

However, the above features are well-known in the art, as evidenced by Chan.

In particular, Chan teaches a system further comprising a proprietary card (Chan; column 3, lines 9-44, column 22, lines 33-43).

It would have been obvious to one of ordinary skill in the art at the time the invention was made to modify the account of Joao to include the above limitations, as taught by Chan, with the motivations of “provid[ing] a mechanism to ... [allow] ... general management of the applications on the smart card. Additionally, it is desirable to ... [...] ... keep cryptographic keys confidential from the issuer of the smart card and to securely allow applications from different entities to coexist on a card” (Chan; column 3, lines 1-7).

Response to Arguments

13. Applicant's arguments filed 30 January 2008 regarding pending claims 54-94 have been fully considered but are moot in view of the new ground(s) of rejection.

Conclusion

14. Any response to this action should be mailed to:

Commissioner of Patents and Trademarks

Washington D.C. 20231

or faxed to: **(571) 273-8300.**

For informal or draft communications, please label
“PROPOSED” or “DRAFT” on the front page of the
communication and do NOT sign the communication.

After Final communications should be labeled "Box AF."

15. Any inquiry concerning this communication or earlier communications from the examiner should be directed to Natalie A. Pass whose telephone number is (571) 272-6774. The examiner can normally be reached on Monday through Thursday from 9:00 AM to 6:30 PM. The examiner can also be reached on alternate Fridays.

16. If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Christopher L. Gilligan can be reached on (571) 272-6770. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

17. Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

/N. A. P./
Examiner, Art Unit 3626
May 27, 2008

/Robert Morgan/
Primary Examiner, Art Unit 3626